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To: Early Education and Care Program Directors
Preschool Program Directors

From: Thomas L. Weber, Commissioner
Department of Early Education and Care

Mitchell D. Chester, EdD, Commissioner
Department of Elementary and Secondary Education

Pejman Talebian, MA, MPH, Director
Immunization Program, Department of Public Health

Re: 2014-2015 Child Care/Preschool Immunization Survey

Date: August 2014

Each year, the Massachusetts Department of Public Health (MDPH) conducts a survey of immunization levels in all child care programs and public and private preschools in the state. The purpose of this survey is to ensure that all children enrolled in these facilities are protected against vaccine-preventable diseases.

Regulations established by the Department of Early Education and Care (EEC) and the Department of Public Health require that:

- 1) licensees must maintain immunization records for all children; and
- 2) all children must be age-appropriately immunized to attend.

These regulations are designed to prevent the illness and disruptions caused by diseases. The Department of Public Health supports a "no shots-no entry" policy for children attending your child care program or preschool. The one exception to this policy is in the case of homeless children attending a **public school** preschool program. These children cannot be denied entry to public schools if they do not have their immunization records. The federal McKinney-Vento Homeless Assistance Act states that if a homeless child or youth arrives lacking immunizations or medical records, refer the parent/guardian to the district's Homeless Education Liaison, who

has the responsibility to obtain relevant academic records, immunizations or medical records and to ensure that homeless students are attending school while the records are obtained. The student must be enrolled and permitted to attend public school in the interim. If you have any questions about the McKinney-Vento Homeless Assistance Act, please contact Sarah Slautterback, State Coordinator, at (781) 338-6330 in the Office for the Education of Homeless Children and Youth, Department of Elementary and Secondary Education.

The minimum immunization requirement for entry into child care or preschool, for children two years and older, is 4 or more doses of DTaP/DTP, 3 or more doses of polio, 1 dose of MMR, 1 to 4 doses of Hib, 3 doses of hepatitis B, and 1 dose of varicella (chickenpox) vaccine or physician-certified history of chickenpox disease.

Children who are not in compliance must be excluded from child care or preschool until the facility receives proper documentation of immunization. To avoid student exclusion, every effort must be made to inform parents and physicians of these requirements. Please see the MDPH document, *Recommended Immunization Schedule 2014*, for additional details.

Please note that in accordance with EEC and MDPH regulations, **all child care staff must provide proof of immunity to measles, mumps and rubella**. Questions regarding staff immunity to measles, mumps and rubella are included in the annual immunization survey. Information and instructions about how to collect and report this information are available on our website www.mass.gov/dph/imm, click on “School Requirements”.

Please note that before- and after-school programs are not required to complete the immunization survey if immunization records are on file for each child with his/her school. If your program falls into this category, please disregard the survey and contact the MDPH Immunization Program at (617) 983-6800 to remove your program from our records. While you do not need to complete the survey, you are still responsible for ensuring the immunization records are on file at each child’s school.

In 2013-2014, immunization records were reviewed from 107,739 children enrolled in licensed group child care programs and preschools across Massachusetts. Cumulative responses from 2,235 programs are listed in the table below.

**Results from Immunization Surveys of Children \geq 2 Years of Age
Enrolled in Licensed Group Child Care/Nursery/Preschool**

School Year	No. of Records Reviewed	≥ 4 DTaP/DTP	≥ 3 Polio	1 MMR	≥ 3 Hib	3 Hep B	Immunity to chicken-pox*	≥ 4 DTaP/DTP and ≥ 3 Polio and 1 MMR	Medical Exemptions	Religious Exemptions
2013-14	107,739	97%	97%	98%	97%	96%	97%	96%	0.3%	0.8%
2012-13	116,290	96%	97%	98%	97%	96%	97%	95%	0.3%	0.8%

*Immunity to chickenpox disease includes children who have a documented physician-certified reliable history of chickenpox disease.

The rate of religious exemptions has been increasing in recent years. We ask you to review your school policies and practices regarding exemptions. Please find the resources below to help you

communicate with vaccine-hesitant parents. These documents can be accessed online at the websites below:

- “Personal belief exemptions for vaccination put people at risk. Examine the evidence for yourself.”(www.immunize.org/catg.d/p2069.pdf) **(Please note that the only exemptions permitted in MA are medical and religious exemptions. Philosophical exemptions are not permitted. A physician statement must be on file for medical exemptions and a parent statement must be on file for religious exemptions.)**
- “What if you don’t immunize your child?” (www.immunize.org/catg.d/p4017.pdf)
- “Vaccine Information and Resources for Providers and Parents,” an MDPH developed resource sheet (mass.gov/dph/imm)

Through strict enforcement of immunization regulations, the high immunization levels seen above can be maintained and children in our state will continue to be protected against vaccine-preventable diseases. This is especially important with recent national and international measles outbreaks, which include cases in Massachusetts.

Results of EEC Staff Immunization Survey

In accordance with EEC regulations, all child care staff must provide proof of immunity to measles, mumps and rubella. According to the survey, **98.5% of all EEC staff had proof of immunity to measles, mumps and rubella in 2013.** While proof of immunity to measles, mumps and rubella are the only requirements, other immunizations are strongly recommended for staff at all child care programs/preschools (EEC and DESE). Please see the document, “Adult Immunizations, Massachusetts Recommendations and Requirements for 2014,” for further information on adult immunization recommendations. This document can be found on our website: www.mass.gov/dph/imm, click on ‘School Requirements.’

Survey of Vaccines that are Recommended (Not Required)

This survey includes recommended vaccinations, in accordance with federal guidelines, in addition to required vaccinations. Information on recommended vaccinations will provide a more accurate picture of immunization levels for preschool children. The reporting of these results is for informational purposes only and will not be included in assessing whether or not the children at your program are in compliance with required immunizations. The following vaccines are recommended for preschool-aged children:

- 4 or more doses pneumococcal conjugate vaccine (PCV7 or PCV13)
- 2 doses hepatitis A vaccine;
- 3 doses rotavirus vaccine; and
- annual influenza vaccine for children 6 months through 18 years of age.

Access to Medical Records

Since the implementation of the HIPAA Privacy Rule in April of 2003, the MDPH Immunization Program has received numerous questions and requests for clarification from school personnel in regards to obtaining individual student immunization records from physician offices. The MDPH Privacy Officer and the Office of the General Counsel have reviewed these requests and concluded that physicians and other licensed providers are permitted under HIPAA, without an individual authorization, to disclose information and records related to a patient’s immunization

status to a school and its agents, including school nurses, to meet the requirements of M.G.L. c. 76, §15, 105 CMR 220.000, and 603 CMR 18.05.

A section of the Reportable Diseases, Surveillance and Isolation, and Quarantine Requirements (105 CMR 300.190 and 191) clarifies school nurses' authority to obtain immunization records or immunization related information required for school admission from health care providers, without the specific authorization of the child's parent(s) or legal guardian(s), as necessary to carry out school immunization requirements. For more information, please review the document titled *Regulation of the Massachusetts Department of Public Health Permits Health Care Providers to Provide Immunization Records to School Nurses without the Authorization of a Parent or Guardian*, found on our website at www.mass.gov/dph/imm, click on 'School Requirements.'

Meningococcal Disease and Vaccination

Please remember that legislation requires the dissemination of information regarding meningococcal disease and vaccination in a variety of settings, including child care programs and preschools. Pursuant to M.G.L c. 111, § 219, 105 CMR 221.000, child care programs and preschools shall provide to a parent or legal guardian information approved or provided by MDPH regarding the risk of meningococcal disease and the availability, effectiveness and risks of meningococcal vaccine. Please review the MDPH-developed document titled *Meningococcal Disease and Daycare Attendees: Commonly Asked Questions* for more information. As outlined in the cover memo, distribution of this document to all new enterers at the time of initial enrollment meets the requirements of this legislation. These documents can be found on our website, www.mass.gov/dph/imm, click on 'School Requirements.'

Worksheets and worksheet instructions to help you complete the survey are sent to you via email and available on our website at www.mass.gov/dph/imm, click on 'School Requirements.'

Please retain copies of the survey and worksheets to facilitate follow-up on children and staff not fully immunized. You may be chosen for a randomized audit of immunization records or be called to review your records by MDPH Immunization Program staff. Thank you for your assistance with the reporting of vaccination levels of child care/preschool students.

Completed surveys should be submitted no later than December 1, 2014.